TRANSMITTAL FORM (to be used for all correspondence after initial filing)			Application Number			10/724,586		
			Filing Date			November 28, 2003		
			First Named Inventor			Christopher Bishop		
			Group Art Unit			2128		
			Confirmation N	Confirmation Number			9877	
☐ Sent via Express Mail Label No.:			Examiner Nam	Examiner Name			Silver, David	
			Attorney Docke	Attorney Docket Number		305414.01		
ENCLOSURES (check all that apply)								
Fee Transmittal Form Fee Attached Amendment / Reply (23 pages) After Final Affidavits/declaration(s)	(for an Replace 1 and 4					After Allowance Communication to T Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	unication to Board of terferences unication to TC	
Extension of Time Request (2 months; total fee \$450.00) Express Abandonment Request Information Disclosure Statement with Form 08B (4 pages; total fee \$180.00)		(37	yly Executed (pages) py from a prior application CFR 1.63(d)) (pages) ng-related Papers			Proprietary Information Status Letter Application Data Sheet		
Response to Notice to File Missing Parts A copy of the Notice to File Missing Parts Under 37 CFR 1.52 or 1.5	Petition Applica		n to Convert to a Pr	ovisional		Request for Co Return Receipt	rrected Filing Receipt Postcard	
CERTIFICATE OF MAILING OR TRANSMISSION (Under 37 CFR § 1.8(a)) I hereby certify that this correspondence is being electronically deposited with the USPTO via EFS-Web on the date shown below: April 20, 2007 /Kate Marochkina/		☐ 37 Termin	al Power of Attorney CFR 3.73(b) Staten nal Disclaimer st for Refund umber of CD(s)		cite	below):	e(s) (please identify) of NPL references	
Date Signature Kate Marochkina Printed Name	Remarks The Commissioner is hereby authorized to charge any additional fees required, or credit any overpayments, to Deposit Account No. 5 0463 for the above identified patent application.							
SIGNATURE OF ATTORNEY OR AGENT								
Signature /A. H. Azure/ Reg			No. 52,580					
Name of Attorney or Agent	ony H. Azure	ny H. Azure						
Date April 20, 2007	Te		(425) 707-039	9	Fa	csimile No.	(425) 708-5046	
Assignee Name:			CROSOFT CORPORATION					

REDMOND, WA 98052

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Customer Number: